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**TRANSMITTAL
FORM**

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/812,521	
	Filing Date	March 30, 2004	
	First Named Inventor	Brotto et al.	
	Art Unit	3721	
	Examiner Name	Scott A. Smith	
Total Number of Pages in This Submission	17	Attorney Docket Number	0275Y-000685/US/COA

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input checked="" type="checkbox"/> Request For Reconsideration <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Postcard		
<table><tr><td>Remarks</td><td>The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 02-2548. A duplicate copy of this sheet is enclosed.</td></tr></table>			Remarks	The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 02-2548. A duplicate copy of this sheet is enclosed.
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Harness, Dickey & Pierce, P.L.C.	Attorney Name	Scott T. Gray	Reg. No.	48,891
Signature					
Date	January 14, 2005				

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Scott T. Gray	Express Mail Label No.	EV 327051083 US
Signature		Date	January 14, 2005

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Brotto et al.

Serial No: 10/812,521

Filed: March 30, 2004

For: System And Method For
Communicating Over Power
Terminals In DC Tools

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: Art Unit: 3721
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: Examiner: Scott A. Smith
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:

REQUEST FOR RECONSIDERATION

Commissioner of Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

In response to the Office Action mailed December 6, 2004, please consider the remarks set forth below.

Claims begin on page 2 of this paper.

Remarks begin on page 11 of this paper.

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